

Applicant Information – READ THIS FORM CAREFULLY AND FOLLOW ALL INSTRUCTIONS TO COMPLETE THE FINGERPRINT PROCESS. You <u>MUST</u> PRESENT THIS FORM TO BE FINGERPRINTED. No exceptions allowed. Variations of this form will not be accepted. Upon completion of the fingerprinting process, a PCN number will be recorded in the designated box and this form will serve as confirmation of fingerprinting. Valid photo identification must be presented at the time of fingerprinting and must have a valid expiration date. Expired New Jersey photo driver license will be accepted in combination with current non-photo license. No other expired identification will be accepted. See Box 26 for ID Requirements.

For applicants who must pay their own fingerprinting fees, payment will be required at the time of scheduling for check and credit card payments. Your account will be charged at the time you schedule. A fee of \$14 is charged to cover the cost of a scheduled appointment for applicants who do not cancel by noon on the business day prior to your scheduled appointment (Saturday noon for Monday appointments). The \$14 fee also applies to applicants who are turned away from the printing sites due to their inability to present proper ID as defined below (26), or who fail to present Universal Fingerprint Form NJAPS1 V 1.7 provided to you by your agency and required for printing (this form). State and Federal search fees will be refunded. State agencies are notified of no shows.

Appointment scheduling is available via the web at **www.bioapplicant.com/nj** 24 hours per day, 7 days per week. For applicants who do not have web access, appointments are available through the toll free call center at (877) 503-5981 on a first call, first served basis Monday through Friday, 8:00 AM to 5:00 PM and Saturday, 8:00 AM to 12 noon. Hearing impaired scheduling is available at (800) 673-0353. English and Spanish operators are available through the Call Center.

Payment by money order at the site will be accepted for applicants scheduling via the call center only. Money order payment must be indicated at the time of scheduling. No other form of payment will be accepted at the fingerprint site.

Your applicant ID number, date, time of appointment and payment confirmation will be confirmed by the call center. You must record the information in the appropriate blocks to the right while speaking with					Date/Time of Appointment		nt Applicant Id N	Applicant Id Number	
operator. Your PCN number will be recorded when your fingerprinting been completed. Retain this form as proof of fingerprinting. No recovil be provided after the date of printing.					PCN		Payment Conf	Payment Confirmation	
(1) First Name		(2) Middle Initial		(3) Last Name					
(4) Daytime Telephone Num	ber (5) Soc	(5) Social Security Number		(6) Date of Birth		(7) Height		(8) Weight	
( ) -			_						
				Place of Birth (State for US izens – Country for all others)  (11) Country of Citizenship			izenship		
(12) Home Address									
Address City				State Zip					
(13) Gender (select one)	(select one) (14) Hair Color (15) Eye (indicate most			e Color (16) Race (select one) A Asian/Pacific Islander (Includes Asian Indian)					
Male Female Both predominant color,				B Black					
	one only)			I American Indian/Alaska Native W White (Includes Hispanic/Spanish origin)					
				U Unknown					
(17) Occupation				(18) Employer Name and Address					
NOTE: Items 19-25 to be completed by employer or agency.									
(19) Statute Number				(20) Reason for Fingerprinting					
<u>N.J.S.A</u> . 17:22B-6				Public Adjuster License - Insurance					
(21) Originating Agency Number (ORI#)				(21) Contributor's Case Number (Agency Unique Identifier)					
NJ920560Z				PublicAdjuster					
(23) Category				(24) Document Type					
INK				RB1					
(26) ACCEPTABLE ID: ID MUST BE ISSUED BY FEDERAL, STATE, COUNTY OR				(25) Payment Information					
MUNICIPAL ENTITY FOR IDENTIFICATION PURPOSES AND MUST INCLUDE PHOTO, NAME, ADDRESS (HOME/EMPLOYER) AND DATE OF BIRTH.				\$78 Fee must be paid directly to Sagem Morpho					
EXAMPLES OF ACCEPTABLE IDENTIFICATION INCLUDE 1) PHOTO DRIVER'S									
LICENSE OR PHOTO ID ISSUED BY ANY STATE DMV OR NJ MVC, 2) PASSPORT OR IMMIGRATION ID, 3) FEDERAL, STATE, COUNTY OR									
MUNICIPAL EMPLOYMENT ID									